WOODSTOCK HEALTH & REHAB CENTER

3415 NORTH SHERIDAN ROAD

KENOSHA 53140 Phone: (262) 657-6175 Ownershi p: Corporation Operated from 1/1 To 12/31 Days of Operation: 366 Highest Level License: Skilled Operate in Conjunction with Hospital? No Operate in Conjunction with CBRF? No Number of Beds Set Up and Staffed (12/31/00): 136 Title 18 (Medicare) Certified? Yes Total Licensed Bed Capacity (12/31/00): 181 Average Daily Census: 126 Number of Residents on 12/31/00: 128

Services Provided to Non-Residents		Age, Sex, and Primary Diagn	Length of Stay (12/31/00)	%				
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year	42. 2	
Supp. Home Care-Personal Care	No					1 - 4 Years	35. 2	
Supp. Home Care-Household Services	No	Developmental Disabilities	2. 3	Under 65	9. 4	More Than 4 Years	22. 7	
Day Services	No	Mental Illness (Org./Psy)	8. 6	65 - 74	15.6			
Respite Care	Yes	Mental Illness (Other)	16. 4	75 - 84	39. 8		100. 0	
Adult Day Care No Alcohol & Other Drug Abuse		0.0	85 - 94	30. 5	***********	******		
Adult Day Health Care No Para-, Quadra-,		Para-, Quadra-, Hemi plegi c	3. 1	95 & 0ver	4. 7	Full-Time Equivalen	t	
Congregate Meals No Cancer		3. 9		Nursing Staff per 100 Re	si dents			
Home Delivered Meals	No	Fractures	3. 9		100. 0	(12/31/00)		
Other Meals	No	Cardi ovascul ar	10. 2	65 & 0ver	90. 6			
Transportation	No	Cerebrovascul ar	7.8			RNs	11. 9	
Referral Service	No	Di abetes	3. 9	Sex	%	LPNs	4. 4	
Other Services	ther Services Yes Respiratory		5. 5	5. 5		Nursing Assistants		
Provi de Day Programmi ng for		Other Medical Conditions	34. 4	Male	31. 3	Aides & Orderlies	23. 9	
Mentally Ill	No			Female	68. 8	I		
Provide Day Programming for			100.0	İ		İ		
Developmentally Disabled	No			İ	100. 0	I		
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Method of Reimbursement

		Medi	care		Medi c	ai d											
		(Titl	e 18)	((Title	19)		0th	er	P	ri vate	Pay		Manag	ed Care		Percent
			Per Die	em		Per Die	m		Per Die	m		Per Diem	ı		Per Diem	Total	Of All
Level of Care	No.	%	Rate	No.	%	Rate	No	. %	Rate	No	. %	Rate	No.	%	Rate	No.	Resi dents
Int. Skilled Care	0	0. 0	\$0.00	5	6. 2	\$110.88	1	50. 0	\$166.00	0	0. 0	\$0.00	0	0. 0	\$0.00	6	4. 7%
Skilled Care	22	100. 0	\$252.00	69	85. 2	\$94.77	1	50. 0	\$118.00	22	100. 0	\$156.45	1	100. 0	\$375.00	115	89. 8%
Intermediate				7	8. 6	\$78.65	0	0. 0	\$0.00	0	0.0	\$0.00	0	0. 0	\$0.00	7	5. 5%
Limited Care				0	0.0	\$0.00	0	0. 0	\$0.00	0	0.0	\$0.00	0	0. 0	\$0.00	0	0.0%
Personal Care				0	0. 0	\$0.00	0	0. 0	\$0.00	0	0.0	\$0.00	0	0. 0	\$0.00	0	0.0%
Residential Care				0	0. 0	\$0.00	0	0. 0	\$0.00	0	0.0	\$0.00	0	0. 0	\$0.00	0	0.0%
Dev. Di sabl ed				0	0. 0	\$0.00	0	0. 0	\$0.00	0	0.0	\$0.00	0	0. 0	\$0.00	0	0.0%
Traumatic Brain Inj	. 0	0.0	\$0.00	0	0. 0	\$0.00	0	0. 0	\$0.00	0	0.0	\$0.00	0	0. 0	\$0.00	0	0.0%
Ventilator-Depender	nt 0	0. 0	\$0.00	0	0.0	\$0.00	0	0. 0	\$0.00	0	0.0	\$0.00	0	0. 0	\$0.00	0	0.0%
Total	22	100.0		81 1	100. 0		2	100. 0		22	100.0		1	100. 0		128	100.0%

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WOODSTOCK HEALTH & REHAB CENTER

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Admissions, Discharges, and		Percent Distribution	of Residents'	Condi t	ions, Services	, and Activities as of $12/3$	31/00
Deaths During Reporting Period							
		[% Needi ng		Total
Percent Admissions from:		Activities of	%	As	sistance of	% Totally	Number of
Private Home/No Home Health	5.8	Daily Living (ADL)	Independent	0ne	Or Two Staff	Dependent I	Resi dents
Private Home/With Home Health	1. 9	Bathi ng	9. 4		56 . 3	34. 4	128
Other Nursing Homes	3. 2	Dressi ng	13. 3		56 . 3	30. 5	128
Acute Care Hospitals	87. 7	Transferri ng	28. 1		48. 4	23. 4	128
Psych. HospMR/DD Facilities	0.0	Toilet Use	19. 5		44. 5	35. 9	128
Rehabilitation Hospitals	0.6	Eati ng	68. 8		14. 8	16. 4	128
Other Locations	0.6	**************	******	*****	********	*********	******
Total Number of Admissions	154	Continence		%	Special Trea	tments	%
Percent Discharges To:		Indwelling Or Extern	nal Catheter	12. 5	Recei vi ng	Respiratory Care	6. 3
Private Home/No Home Health	35.0	0cc/Freq. Incontinen	nt of Bladder	55. 5	Recei vi ng	Tracheostomy Care	0. 8
Private Home/With Home Health	5.6	0cc/Freq. Incontinen	nt of Bowel	52. 3	Recei vi ng	Sucti oni ng	0. 8
Other Nursing Homes	11.3				Recei vi ng	Ostomy Care	1. 6
Acute Care Hospitals	15.0	Mobility			Recei vi ng	Tube Feeding	7. 0
Psych. HospMR/DD Facilities	0.0	Physically Restraine	ed	4. 7	Recei vi ng	Mechanically Altered Diets	23. 4
Rehabilitation Hospitals	0.0						
Other Locations	5.6	Skin Care			Other Reside	nt Characteristics	
Deaths	27. 5	With Pressure Sores		7. 0	Have Advan	ce Directives	100. 0
Total Number of Discharges		With Rashes		1.6	Medi cati ons		
(Including Deaths)	160	[Recei vi ng	Psychoactive Drugs	18. 8
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		0wn	ershi p:	Bed	Si ze:	Li c	ensure:		
	Thi s	Pro	pri etary	100	- 199	Ski	lled	Al l	
	Facility	Peer	Group	Peer	Group	Peer	Group	Faci l	lities
	%	%	Ratio	%	Ratio	%	Ratio	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	69. 6	82. 5	0. 84	83. 6	0.83	84. 1	0.83	84. 5	0.82
Current Residents from In-County	59. 4	83. 3	0.71	86. 1	0.69	83. 5	0.71	77. 5	0.77
Admissions from In-County, Still Residing	21. 4	19. 9	1. 08	22. 5	0. 95	22. 9	0. 94	21.5	1.00
Admissions/Average Daily Census	122. 2	170. 1	0. 72	144. 6	0.85	134. 3	0. 91	124. 3	0. 98
Discharges/Average Daily Census	127. 0	170. 7	0. 74	146. 1	0. 87	135. 6	0.94	126. 1	1.01
Discharges To Private Residence/Average Daily Census	51.6	70.8	0. 73	56 . 1	0. 92	53. 6	0. 96	49. 9	1.03
Residents Receiving Skilled Care	94. 5	91. 2	1.04	91. 5	1.03	90. 1	1.05	83. 3	1. 13
Residents Aged 65 and Older	90. 6	93. 7	0. 97	92. 9	0. 98	92. 7	0. 98	87. 7	1.03
Title 19 (Medicaid) Funded Residents	63. 3	62. 6	1. 01	63. 9	0. 99	63. 5	1.00	69. 0	0. 92
Private Pay Funded Residents	17. 2	24. 4	0.70	24. 5	0. 70	27. 0	0.64	22.6	0.76
Developmentally Disabled Residents	2. 3	0.8	3.04	0.8	2.85	1. 3	1. 87	7. 6	0. 31
Mentally Ill Residents	25. 0	30. 6	0. 82	36. 0	0.69	37. 3	0.67	33. 3	0.75
General Medical Service Residents	34. 4	19. 9	1. 73	21. 1	1.63	19. 2	1. 79	18. 4	1.86
Impaired ADL (Mean)	50. 3	48. 6	1.04	50. 5	1.00	49. 7	1.01	49. 4	1.02
Psychological Problems	18. 8	47. 2	0.40	49. 4	0. 38	50. 7	0. 37	50. 1	0. 37
Nursing Care Required (Mean)	6. 1	6. 2	0. 98	6. 2	0. 98	6. 4	0. 94	7. 2	0.85